


Apr 19
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**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P98000102718		
1. Entity Name J. F. LIMITED, INC.		
Principal Place of Business 1460 MAIN STREET BOX 9 SARASOTA, FL 34236	Mailing Address 1460 MAIN STREET BOX 9 SARASOTA, FL 34236	
DO NOT WRITE IN THIS SPACE		01262004 No Chg-P CR2E034 (10/03)
		4. FEI Number 65-0886320 Applied For Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
FELLABAUM, JOHN A 1460 MAIN STREET #9 SARASOTA, FL 34236		DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
		U000000118703 04/19/04-80070-017 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD FELLABAUM, JOHN A 1460 MAIN STREET BOX 9 SARASOTA, FL 34236	U000000118703 04/19/04-80070-018 8.75
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>John Allen Fellabaum</u>		Date: <u>4/16/08</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #